MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL 10/533208 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ᵗ AMENDMENT		AFTER 2ⁿ AMENDMENT			AS FILED		AFTER 1ᵗ AMENDMENT		AFTER 2ⁿ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
4		/					54						
5		/					55						
6		/					56						
7		/					57						
8		/					58						
9		/					59						
10		0					60						
11		/					61						
12		/					62						
13		/					63						
14		/					64						
15	/						65						
16		/					66						
17		/					67						
18		/					68						
19		/					69						
20		/					70						
21		/					71						
22		/					72						
23		/					73						
24		/					74						
25		/					75						
26		/					76						
27	/						77						
28	/						78						
29		/					79						
30		/					80						
31		0					81						
32		/					82						
33		/					83						
34	/						84						
35		/					85						
36	/						86						
37	/						87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	7						TOTAL IND.						
TOTAL DEP.	30						TOTAL DEP.						
TOTAL CLAIMS	37						TOTAL CLAIMS						

PTO - 1360 (REV. 11-01)

U.S. DEPARTMENT of COMMERCE